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## "FEE ADDRESS" INDICATION FORM

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For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
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The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
7,615,557	10/574,122
	1 0
Completed by (check one):	1 / /
Applicant/Inventor	Signature
X Attorney or Agent of record 54,781 (Reg. No.)	Jason C. Chiumney
(Reg. <b>N</b> o.)	Typed or printed name
Assignee of record of the entire interest. See 37 CFR	
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
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This collection of information is required by 37 CPR 1.363. The information is required to Obtah or retain a benefit by the public winks is to file (raid by the USP) to process) an application. Confidentiality is govered by \$9 U.S. 0.12 and 37 CPR 1.11 and 1.11. This collection is estimated to take forminues to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Then will vary depending upon the individual case. Any comments of the amount of time you require to complete this form and/or suggestions for retoring this Lutden, should be sent to the Chief Information Cffice (J.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22231-4450. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND TO. MISI Stopp M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22331-4450.